

CR

**Black Canyon Trout Farm**

IDG130113  
PO Box 121  
Grace ID 83241

RECEIVED

APR - 2 2019

EPA - REGION 10  
Office of Compliance and Enforcement

Mr. Raymond Andrews  
Compliance Officer  
Water and Wetlands Enforcement Unit  
US. Environmental Protection Agency  
1200 Sixth Avenue, Suite 155, OCE-201  
Seattle Washington 98101

To OCE-201

This letter is in response to the notice of violation dated March 4 2019 to Black Canyon Trout Farm NPDES IDG130113. I have carefully reviewed the list of violations and the IDG-130000 general aquaculture permit and have determined the cause of the violations and have taken corrective actions to ensure full compliance moving forward. In this letter I will address each violation, its cause and the corrective action individually.

**Administrative File Review**

Failed submission of the December 2014 DMR, This violation occurred before we acquired the farm in August 2015, however I was able to find a completed and signed DMR for Dec 2014 in our records. I am unsure why it was never received. I have included a copy of this DMR for your records.

Missing phosphorus data on the July 2015 DMR, This violation occurred before we acquired the farm in August 2015, however I was able to find the lab reports and the DMR in our files and I have filled in the missing data. I have included a copy of this corrected DMR for your records.

**June 2018 Inspection**

**1. Violation of Part II.F.3.b No description of flow measuring devices in the QAP.**

I have carefully reviewed part II section F of the permit and have made the corrections to our Quality assurance plan. While this has been missing from our QAP we do regularly inspect and clean our measuring devices and are confident that our water flow measurements have been accurate. I have included a copy of our revised QAP

**2. Violation of part II.F.2 Violation to chain of custody and quality assurance.**

On the June 15 2017 lab report I failed to fill in the required chain of custody information I have carefully reviewed the chain of custody documents and the labs QAP. In the future when receiving the completed lab report, if any information in the chain of custody is incomplete or missing the results will be rejected and we will retest. This has been added to our QAP.

**3. Violation V .C of the permit, temperature of samples.**

On the June 15 2017 lab report there was a violation for temperature on receipt of the water samples. I have taken corrective measures to ensure proper temperature of the samples by chilling samples prior to shipping and using a better cooler to ship the samples. I have also instructed the lab to notify me if the samples arrive over temperature so that I can resend new samples. If necessary, I will personally drive the samples to the test facility if proper temps cannot be managed during shipping. This has been added to our QAP.

4. Part VII.I violation of notice for permit transfer.

A letter dated August 5 2015 was submitted to both the EPA and IDEQ regarding the farm sale and intent to transfer the discharge permit. At the time I was aware of the 30 day notice requirement. After reviewing the letter I can see that we did not clearly state our intent. In the letter it stated that we "begin the process of transfer of ownership" and that I would be managing the facility and would be responsible for operating and reporting. The August 2015 DMR was completed by me and the previous owner George Kimball. My intent was I could run the facility under the previous owners permit until the transfer was complete, similar to somebody who rents and operates a facility and uses the owners discharge permit. Sometime after the 30 days I called the EPA office to confirm the transfer of the permit. I was told the transfer was approved and to continue using the remaining blank DMRs from the previous owner for the rest of the year, and the new DMRs for 2016 would be under our ownership. There was no lapse of reporting during the transfer period.

5. Part II.F.2 QAP not written in the prescribed format.

I have studied the sample format provided by IDEQ and have consulted with the University of Idaho Aquaculture extension agent on writing and executing a proper quality assurance plan. I have completed the revised and reformatted quality assurance plan and have attached a copy for your review.

As the operator of Black Canyon Trout Farm I take full responsibility for the noted violations during the time I have operated the farm. I have studied the permit and consulted with industry experts to better understand the requirements and have made immediate corrections to the areas of violation. You can be assured of full compliance moving forward.

Please feel free to contact me at 801-940-3841 if you have any questions regarding these matters.

Sincerely

 *MARCH 28 2019*

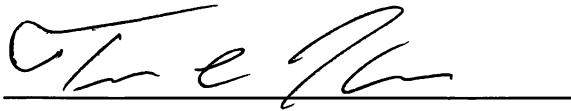
Travis Krebs,  
Operator Black Canyon Trout Farm

**Quality Assurance Project Plan For Sampling And Monitoring  
March 2019 Revision**

**Black Canyon Trout Farm  
1681 Black Canyon Ln  
P.O. Box 121  
Grace, Idaho 83241**

**NPDES Permit IDG 130113**

**Permittee Signature**



**Name**

TRAVIS KREBS

**Date**

MARCH 28 2019

# **Table of Contents**

## **1.0 Plan Management**

- 1.1 Staff Organization and Responsibilities
- 1.2 Monitoring Description and Schedule
- 1.3 Data Quality Objectives
- 1.4 Special Training Requirements
- 1.5 Documentation and Records

## **2.0 Measurement and Sampling**

- 2.1 Sampling Process
- 2.2 Sampling Methods Requirements
- 2.3 Sample Handling and Custody Requirements
- 2.4 Analytical Methods Requirements
- 2.5 Data Management
- 2.6 Instrument Calibration and Maintenance

## **3.0 Assessment and Oversight**

- 3.1 Assessment

## **4.0 Data Validation and Usability**

- 4.1 Validation

## **Attachments:**

Map of Black Canyon Trout, water flows and sample points.

## Plan Management

### 1.1 Staff Organization and Responsibilities

Operator: Travis Krebs

- Responsible for oversight and review of activities associated with NPDES Permit IDG 130113 requirements.

Black Canyon Facility Manager

- Insure compliance with NPDES permit standards and QAPP implementation.
- Communicate and coordinate environmental training for facility employees.

All Personnel Associated With Black Canyon Trout Farm

- Take a proactive approach; be conscientious and diligent concerning job activities that affect the environment.
- Communicate ideas and concerns to appropriate personnel.
- Follow Best Management Practices and seek ways to improve methods and equipment involved with environmental and fish husbandry techniques.

### 1.2 Monitoring Description and Schedule

Black Canyon Trout Farm is authorized to operate under NPDES General Permit IDG 130113. BCT produces up to 100,000 of harvestable of fish per year.

<b>Raceway and full-flow settling basin discharge monitoring requirements</b> <b>Harvestable weight of fish per year up to 100,000</b>				
Parameter	Unit	Frequency	Sample Type	Location
Flow	cfs	1x/month	Parshall Flume	Effluent
TSS	mg/L lbs/day	2x/year	Composite	Influent & effluent
TP	mg/L lbs/day	2x/year	Composite	Influent & effluent

Total suspended solids and total phosphorus will be sampled twice per year based on a calendar year. Flow will be measured monthly.

We also employ an offline settling basin as part of our waste management, waste and sediment is pumped into the pond the solids are allowed to settle and the water evaporated. There is no water discharged from this basin.

The waste load allocation for Black Canyon Trout Farm is seasonal based and found in Table 5 of the permit.

<b>Table 5</b>						
<b>Effluent Limitations for Bear River Facilities</b>						
<b>Facility Name</b>	<b>Permit Number</b>	<b>Season</b>	<b>Limitations (lbs/day)</b>			
			<b>Net Total Suspended Solids</b>		<b>Net Total Phosphorus</b>	
			<b>Average Monthly</b>	<b>Maximum Daily</b>	<b>Average Monthly</b>	<b>Maximum Daily</b>
Bear River Trout Farm	IDG130113	Jan.—Mar.	539.0	1024.1	5.4	8.0
		Apr.—Jun.	539.0	1024.1	8.0	11.8
		Jul.—Sep.	539.0	1024.1	3.6	5.3
		Oct.—Dec.	539.0	1024.1	3.6	5.3

### 1.3 Data Quality Objectives

The primary purpose of this QAPP is to assist in planning for the collection and analysis of samples required by the general NPDES permit and to explain data anomalies when they occur. It is important to follow three basic sampling principles to ensure data of known and defensible quality:

- Samples must be representative.
- Follow proper sampling techniques.
- Properly preserve the samples prior to analysis.

BCT will work closely with water quality laboratories used for sample analysis to ensure high quality data. The laboratories will do control samples, such as duplicates and spiked samples, as part of their own QAPP.

### 1.4 Special Training Requirements

Personnel who have been properly trained will perform collection, preservation and handling of samples. Training will include:

- Sampling locations for BCT.
- Familiarization with sample process and sampling method requirements.
- Proper record keeping.
- Standard operating procedures for collecting samples for TSS, TP, and other appropriate parameters.
- Familiarization and understanding of the following documents;
  - a. NPDES Permit
  - b. Discharge Monitoring Report

- c. Quality Assurance Project Plan for BCT
- d. Best Management Practices Plan for BCT

## **1.5 Documentation and Records**

It is important to have proper documentation and control of the NPDES samples. A sample should be traceable from the field to the laboratory and from the laboratory to the recording of the results. A standardized data collection and custody form provided by the lab will allow BCT to track each sample. Information on the data collection and custody form includes the facility NPDES permit number, facility contact information, date, time, location, type of sample, parameter, and who took the sample. Every time the sample changes hands there must be an exchange of signatures on the form. Completed standardized data collection and custody forms are kept on file at the BCT office, as are all other documents associated with the general NPDES permit. All completed lab results will be carefully reviewed for proper custody documentation, any reports lacking proper documentation will be rejected and a retest will be conducted.

Laboratory results will be recorded onto the Discharge Monitoring Reports. Records of the laboratory data will be kept and attached to the DMRs. The DMRs will be submitted via NET DMR. DMR and lab reports will be kept on file for the required 5yrs at the BCT office.

## **1.0 Measurement And Sampling**

### **2.1 Sampling Process**

Sample types included in the sample process are metered, composite and grab and these are defined in the general NPDES permit.

Parameter	Units	Sample Type	Sample Location
Flow	cfs	Parshall Flume	Discharge Flume
TSS	mg/L	Grab	Influent
TSS	mg/L	Composite	Effluent
TP	mg/L	Grab	Influent
TP	mg/L	Composite	Effluent

See attached diagram for sampling locations.

### **2.2 Sampling Methods Requirements**

The goal is to accurately characterize the discharge using water quality samples. All water sources at BCT converge to a single point through a parshall flume before being

discharged to the bear river at this point is where the effluent will be measured and sampled.

Sample times will represent normal workdays between dawn and dusk. The water quality laboratory will provide sample bottles. All sample bottles will be clean and properly labeled. The collection bottle will be tripled rinsed prior to taking the grab sample. Composite samples will consist of four discrete one-liter grab samples taken at a minimum of 30 minutes apart from each other between dawn and dusk. One of the grab samples will be taken during raceway cleaning. After each grab sample 125 ml will be poured into a clean .5 liter bottle for TSS and TP, respectively. After pouring the 125 ml discrete sample into the clean .5 liter bottle, the bottle will be stored in the refrigerator located on the facility. Once the samples are collected, they will be handled and preserved according to the sample type and the procedures found below:

TSS – refrigeration or icing to 4° C

TP – cooled to 4° C at time of collection

Flow will be measured using the Parshall Flume and calculated using the standard chart.

### **2.3 Sample Handling and Custody Requirements**

Once the samples are collected, they will be taken to the laboratory for analysis or placed in a refrigerator for storage. Attempts will be made to limit the time the samples are stored in the refrigerator before transporting the samples to the laboratory. During transport to the refrigerator or laboratory the samples will be kept as cool as possible. The samples will be sent overnight in an iced cooler to the lab for analysis, if sufficiently cool samples cannot be achieved by overnight shipping the samples will be driven to the lab.

Labels will be used to prevent sample misidentification and to track the sample from the field to the laboratory. Sample labels will include facility name, date, time, location, type of sample, parameter, and who took the sample. A standardized data collection and custody form as described in section 1.5 above will be used to track the sample.

### **2.4 Analytical Methods Requirements**

Idaho Springs will utilize laboratory facilities that have the capability to analyze water quality samples according to EPA approved methods with the required method detection limits of 0.005mg/L and 2.0 mg/L for total phosphorous and total suspended solids, respectively. These laboratories should also have QA Plans that meet EPA Region 10 guidelines and SOPs for each measurement procedure and for sample and document control in the lab.

Proposed laboratories include the following, but are not limited to:

- Magic Valley Lab Inc, 210 Addison, Twin Falls, ID, 208-733-4250



## **2.5 Data Management**

All information pertaining to the NPDES permit will be kept at the BCT offices. All records will be saved for at least five years.

The BCT facility manager will be responsible for oversight of data. All data and calculations will be doubled checked for accuracy and completeness. The sampling and monitoring results will be reported each quarter on the Discharge Monitoring Report. The reports will be submitted by the 20<sup>th</sup> of the month following sampling. Travis Krebs, operator of BCT, (or other authorized signatory) will review and sign the completed DMRs prior to submitting to Net DMR .

## **2.6 Instrument Calibration and Maintenance**

Metered instruments used to measure water quality parameters will be calibrated and maintained according to manufacturers' instructions and checked for accuracy on a regular basis. Parshall flumes will be inspected to ensure cleanliness and to ensure no water has been allowed to bypass the flume.

## **2.0 Assessment**

### **3.1 Assessment**

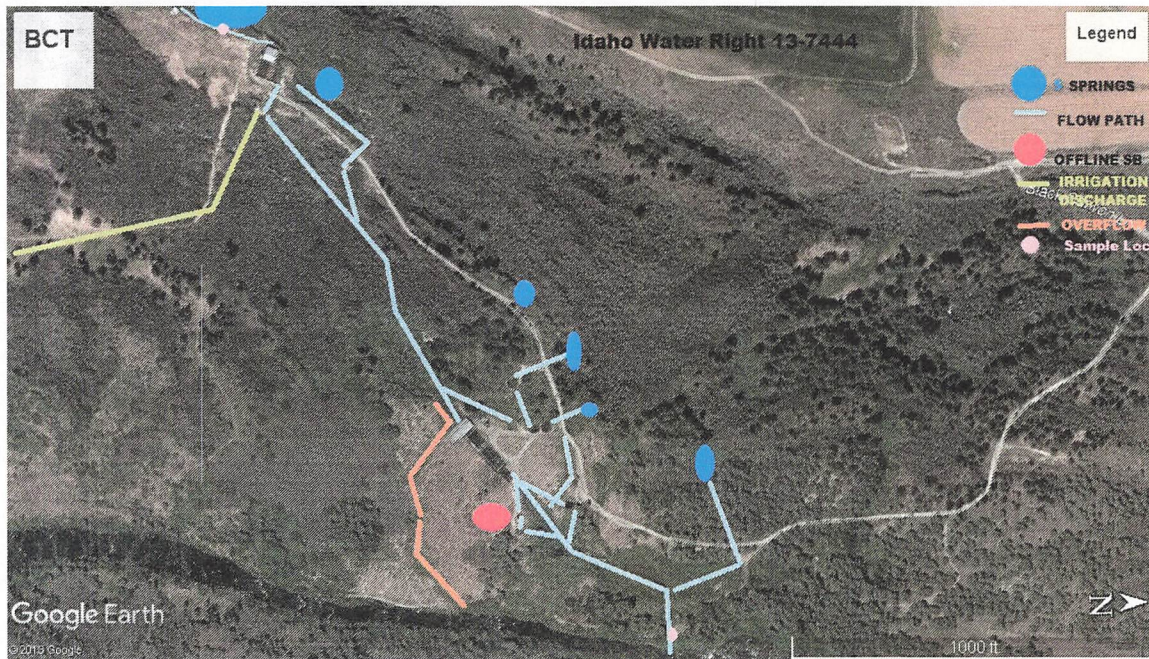
The Quality Assurance Project Plan will be evaluated for proper implementation based on EPA and DEQ compliance inspections and sampling performance. It is the responsibility of the reporting laboratory to assess its water quality data for bias and precision prior to reporting to BCT..

## **3.0 Validation**

### **4.1 Validation**

The BCT facility manager will compare the laboratory results, raw data sheets and calculations with the DMR entries. In the event a monitored parameter is not in compliance, or appears to be erroneous, a second sample will be collected and analyzed. If the second measurement confirms a suspect reading or a non-compliance event, an investigation into the cause will begin and a corrective action taken if possible. BCT will work closely with the reporting laboratory to determine the cause.

Map 1: Water Flow at Black Canyon Trout Farm





NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved  
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: BEAR RIVER TROUT FARM  
ADDRESS: P O BOX 121  
GRACE, ID 83241

FACILITY: BEAR RIVER TROUT FARM  
LOCATION: 1681 BLACK CANYON LANE  
GRACE, ID 83241

ATTN: GEORGE KIMBALL, OWNER/OPERATOR

IDG130113	SUM-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
7/1/2015	7/31/2015

DMR Mailing ZIP CODE: 83241

MINOR  
(SUBR 03)  
FACILITY TOTAL  
Sum

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	<1	<1	mg/L		Two Per Yr	COMPOS
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice per Yea	COMPOS
Solids, total suspended	SAMPLE MEASUREMENT	228	328		*****	4	4	mg/L		Two/yr	Calctd
00530 2 0 Effluent Net	PERMIT REQUIREMENT	539 MO AVG	1024.1 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice per Yea	CALCTD
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	3	3	mg/L		2/yr	COMPOS
00530 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice per Yea	COMPOS
Phosphorus, total [as P]	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.020	0.020	mg/L		2/yr	COMPOS
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice per Yea	COMPOS
Phosphorus, total [as P]	SAMPLE MEASUREMENT	2.1	3.2	lb/d	*****	2.5	2.5	mg/L		2/yr	Calctd
00665 2 3 Effluent Net	PERMIT REQUIREMENT	3.6 MO AVG	5.3 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice per Yea	CALCTD
Phosphorus, total [as P]	SAMPLE MEASUREMENT	*****	*****	*****	*****	.036 <sup>TK</sup>	.036 <sup>TK</sup>	mg/L		2/yr	COMPOS
00665 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice per Yea	COMPOS
Hardness, total [as CaCO3]	SAMPLE MEASUREMENT	*****	*****	*****	*****	na	na	mg/L		Quarterly	COMPOS
00900 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. DAILY MX	Req. Mon. DAILY MX	mg/L		Quarterly	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE	DATE
George Kimball		208 425-3239	7/31/15
TYPED OR PRINTED		AREA Code	NUMBER
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
SEE INSTRUCTION SHEET ACCOMPANYING DMR.

CORRECTION FROM LAB RESULTS MARCH 2014  
TRAVIS KREBS

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved  
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: BEAR RIVER TROUT FARM  
ADDRESS: P O BOX 121  
GRACE, ID 83241  
FACILITY: BEAR RIVER TROUT FARM  
LOCATION: 1681 BLACK CANYON LANE  
GRACE, ID 83241


ATTN: GEORGE KIMBALL, OWNER/OPERATOR

IDG130113	SUM-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
7/1/2015	7/31/2015

DMR Mailing ZIP CODE: 83241  
MINOR  
(SUBR 03)  
FACILITY TOTAL  
Sum

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	50.500	mg/L		Quarterly	Comp
01119 10 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	COMPOS
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	*****	15.0	CFS	*****	*****	*****	*****		Monthly	MEASRD
50050 10 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	cfs	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
George Kimball			208-425-3239	7/31/15
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
SEE INSTRUCTION SHEET ACCOMPANYING DMR.

## DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: BEAR RIVER TROUT FARM

ADDRESS: P O BOX 121  
GRACE, ID 83241

FACILITY: BEAR RIVER TROUT FARM

LOCATION: 1681 BLACK CANYON LANE  
GRACE, ID 83241

ATTN: GEORGE KIMBALL, OWNER/OPERATOR

IDG130113

PERMIT NUMBER

SUM-A

DISCHARGE NUMBER

## MONITORING PERIOD

MM/DD/YYYY

12/1/2014

MM/DD/YYYY

12/31/2014

DMR Mailing ZIP CODE:

83241

MINOR

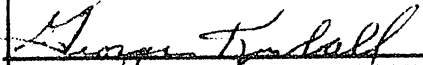

(SUBR 03)

FACILITY TOTAL

Sum

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	N/A	N/A	mg/L		2x Y	COMP
00530 20 Effluent Net	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice Per Year	COMPOS
Solids, total suspended	SAMPLE MEASUREMENT	N/A	N/A	16/d	*****	N/A	N/A	mg/L		2x Y	CALC
00530 20 Effluent Net	PERMIT REQUIREMENT	539 MO AVG	1024.1 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice Per Year	CALCTD
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	N/A	N/A	mg/L		2x Y	COMP
00530 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice Per Year	COMPOS
Phosphorus, total [as P]	SAMPLE MEASUREMENT	*****	*****	*****	*****	N/A	N/A	mg/L		2x Y	COMP
00665 10 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice Per Year	COMPOS
Phosphorus, total [as P]	SAMPLE MEASUREMENT	N/A	N/A	16/d	*****	N/A	N/A	mg/L		2x Y	CALC
00665 23 Effluent Net	PERMIT REQUIREMENT	3.6 MO AVG	5.3 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice Per Year	CALCTD
Phosphorus, total [as P]	SAMPLE MEASUREMENT	*****	*****	*****	*****	N/A	N/A	mg/L		2x Y	COMP
00665 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Twice Per Year	COMPOS
Hardness, total [as CaCO3]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	343	mg/L		Quarterly	COMPOS
00900 10 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
 TYPED OR PRINTED	(208) 334-3239 AREA Code NUMBER		12-31-14 MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SEE INSTRUCTION SHEET ACCOMPANYING DMR.



## DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: BEAR RIVER TROUT FARM

ADDRESS: P O BOX 121  
GRACE, ID 83241

FACILITY: BEAR RIVER TROUT FARM

LOCATION: 1681 BLACK CANYON LANE  
GRACE, ID 83241

ATTN: GEORGE KIMBALL, OWNER/OPERATOR

IDG130113	SUM-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
12/1/2014	12/31/2014

DMR Mailing ZIP CODE:

83241

MINOR


(SUBR 03)

FACILITY TOTAL

Sum

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 0.010	mg/L		Quart.	COMPOS
0.10 t Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Quarterly	COMPOS
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	*****	31.1	cfs	*****	*****	*****	*****		MO	MEAS
50050 1.0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	cfs	*****	*****	*****	*****		Monthly	MEASRD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
George Kimball			(208) 425 3888	12-31-14
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SEE INSTRUCTION SHEET ACCOMPANYING DMR.